

VACMAN Interface Component (VACMAN.DLL), Business Rules

<i>Class. Method</i>	<i>Method Name</i>	<i>Method Parameter</i>	<i>Req / Opt</i>	<i>Format</i>	<i>Business Rule</i>
1	Depot Provider Order Create/Update	Overview			Create or update a provider's vaccine order in VACMAN, to be shipped from Project/Depot inventory.
		Shipment Date	Req	yyyymmdd	
		Depot ID	Req	char 6	The Depot ID must match the ID of a Vaccine Depot defined in VACMAN.
		PIN (Provider ID)	Req	char 6	The Provider ID must match the ID of an "active" Provider defined in VACMAN. For Varicella order, the provider must be defined as "varicella-eligible".
		Vaccine	Req	char 8	If the Provider is classified as a "private provider", the vaccine type must be one that can be distributed to private providers.
		Number of Doses	Req	int 6	Number of doses cannot be less than minimum order size established in VACMAN Vaccine Reference Table. If the number of doses is not divisible by the vial size, the object will adjust upward the number of doses to be divisible by the vial size.
		Lot Number	Req	char 15	Optional
		Excess Allowance Level	Opt	char 1	1 = Don't check for excess doses; 2 = Check for excess doses and reject order if in excess; 3, 4 or 5 = Check for excess doses and if necessary override using one of three explanations (3="Disease Outbreak", 4="Special Initiative", 5="Increased Enrollment)
		Order Date	Opt	yyyymmdd	Cannot be later than current date.
2	Doses Administered Create/Update	Overview			Create or Update a Doses Administered record in VACMAN (using the original, pre-1998 age category definitions).
		Reporting Date	Req	yyyymmdd	The date that the doses administered data is being reported.
		PIN (Provider ID)	Req	char 6	The Provider ID must match the ID of a Provider defined in VACMAN.
		Vaccine	Req	char 8	Must match a vaccine type in the VACMAN Vaccref table.
		Vaccine Sector	Req	char 1	1 = publicly funded vaccine. 2 = privately funded vaccine.
		Dose In Series	Req	int 1	If dose in series is not known, default to 1.
		Doses Less Than 1 Year	Opt	int 6	The dose count of vaccine administered for children less than 1 year of age during the reporting period that ends with the reporting date.
		Doses for 1 Year	Opt	int 6	
		Doses for 2 Years	Opt	int 6	
		Doses for 3 to 4 Years	Opt	int 6	

Note: Req/Opt = Required/Optional parameters.

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		Doses for 5 Years	Opt	int 6	
		Doses for 6 to 9 Years	Opt	int 6	
		Doses for 10 to 14 Years	Opt	int 6	
		Doses for 15 to 19 Years	Opt	int 6	
		Doses for 20 to 24 Years	Opt	int 6	
		Doses for 25 to 44 Years	Opt	int 6	
		Doses for 45 to 64 Years	Opt	int 6	
		Doses for 65 Years and Older	Opt	int 6	
		Doses for Unknown Age	Opt	int 6	
		Total Doses	Opt	int 6	
		User Defined Category 1 Doses	Opt	int 6	
		User Defined Category 2 Doses	Opt	int 6	
		User Defined Category 3 Doses	Opt	int 6	
	Provider Inventory Adjustment				Create or update a provider inventory adjustment ("Distribution - Other Transaction") record in VACMAN for vaccine reported by the provider as wasted (expired, spoiled, lost/damage) or transferred.
3	Create/Update	Overview			
		Depot/From Provider ID	Req	char 6	The Depot/From Provider ID must match the ID of a Vaccine Depot defined in VACMAN -- or if the transaction is "Transferred between Providers", the Depot/From Provider ID must match the ID of a Provider defined in VACMAN.
		Entry Date	Req	yyyymmdd	Entry date and Transaction date cannot exceed current date.
		Transaction Date	Req	yyyymmdd	Entry date and Transaction date cannot be more than 365 days apart.

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		Transaction Code	Req	char 2	Transaction code must be between 3-8 and match a code in the VACMAN Actref table.
		PIN (Provider ID)	Req	char 6	The Provider ID must match the ID of a Provider defined in VACMAN.
		Vaccine	Req	char 8	
		Lot Number	Req	char 15	
		Number of Doses	Req	int 6	Must be greater than zero.
					For transaction types 3-8: there must be a record in the VACMAN Inventory that matches the vaccine type and lot number of this transaction.
					For transaction type 2 (viable vaccine returned): there must be a record in the VACMAN Inventory that matches the Depot ID, vaccine type and lot number of this transaction.
4	Inventory on Hand Read	Overview			Read a list of lot numbers (including expiration date, manufacturer, vial size, doses on hand) from VACMAN's inventory on hand table for a specified Depot.
		Depot ID	Req	char 6	The Depot ID must match the ID of a Vaccine Depot defined in VACMAN.
5	Manufacturer Provider Order Read	Overview			Read provider vaccine order records from VACMAN for vaccines [to be] shipped directly by vaccine manufacturer (I.e., Merck Varicella vaccine).
		PIN (Provider ID)	Req	char 6	
		Vaccine	Req	char 8	
		Shipment Date - Begin	Req	yyyymmdd	Shipment Date, or Beginning date of Shipment Date Range
		Shipment Date - End	Opt	yyyymmdd	Ending date of Shipping Date Range
		Lot Number	Opt	char 15	
6	Manufacturer Provider Order Create/Update	Overview			Create or update a provider's vaccine order in VACMAN, to be shipped directly by vaccine manufacturer (I.e., Merck Varicella vaccine).
		Order Date	Req	yyyymmdd	Cannot be later than current date.
		PIN (Provider ID)	Req	char 6	The Provider ID must match the ID of an "active" Provider defined in VACMAN. For Varicella order, the provider must be defined as "varicella-eligible".

Note: Req/Opt = Required/Optional parameters.

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		Vaccine	Req	char 8	If the Provider is classified as a "private provider", the vaccine type must be one that can be distributed to private providers.
		Number of Doses	Req	int 6	Number of doses cannot be less than minimum order size established in VACMAN Vaccine Reference Table. If the number of doses is not divisible by the vial size, the object will adjust upward the number of doses to be divisible by the vial size.
		Funding Source	Req	char 1	Must match value in VACMAN Funding table. 1 (VFC) and 2 (G317) are federal CDC funding codes. All other funding codes are for state/other funding.
		Excess Allowance Level	Opt	char 1	1 = Don't check for excess doses; 2 = Check for excess doses and reject order if in excess; 3, 4 or 5 = Check for excess doses and if necessary override using one of three explanations (3="Disease Outbreak", 4="Special Initiative", 5="Increased Enrollment)
		State Purchase Order Number	Opt	char 32	If Funding Code is anything other than 1 (VFC) or 2 (G317), State P.O. number cannot be empty. If Funding Code is 1 or 2, State P.O. number is ignored.
7	Provider Profile Create/Update	Overview			Create or update a Provider Profile record in VACMAN.
		PIN (Provider ID)	Req	char 6	Provider ID must match an existing Provider record for update; otherwise, a new record is created.
		Facility Name/Last Name	Req	char 35	Facility (Clinic) Name or Provider's Last Name
		Shipping Contact	Req	char 30	Shipping Contact Name cannot be empty
		Shipping Address Line 1	Req	char 35	Shipping Address Line 1 cannot be empty.
		Shipping Address Line 2	Req	char 35	may be empty.
		Shipping City	Req	char 20	Shipping City cannot be empty.
		Shipping State	Req	char 2	Shipping State must be present and must be in the VACMAN States table.
		Shipping ZipCode	Req	char 10	Format: 99999-9999 or 99999. The first 5 digits of the Shipping ZipCode must be present and must be in the VACMAN ZipCodes table.
		Shipping Instructions	Req	char 50	cannot be empty; if there are no instructions, supply the word "NONE"

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		Mailing Contact Name	Req	char 30	
		Mailing Address Line 1	Req	char 35	
		Mailing Address Line 2	Req	char 35	
		Mailing City	Req	char 20	
		Mailing State	Req	char 2	
		Mailing ZipCode	Req	char 10	Format: 99999-9999 or 99999.
		Phone Number	Req	char 14	(999) 999-9999 format; cannot be empty
		Fax Number	Req	char 14	Format: (999) 999-9999
		Varicella Eligibility Status	Req	char 1	"Y" if provider is eligible to receive/store varicella vaccine. "N" if not eligible.
		Classification Code	Opt	int 2	Classification Code must be between 10-29 and must be in the VACMAN Sectoref table.
		VFC Certification Date	Opt	yyyymmdd	Cannot exceed current date by more than 30 days.
		Phone Extension	Opt	char 4	may be empty.
		First Name	Opt	char 15	Provider's First Name: Include only if Provider's Last Name is in the Facility/Last Name field.
		Middle Initial	Opt	char 1	Provider's Middle Initial: Include only if Provider's Last Name is in the Facility/Last Name field.
		Title	Opt	char 9	Provider's Title, such as "M.D.". Include only if Provider's Last Name is in the Facility/Last Name field.
		Parent Provider ID	Opt	char 6	Include if provider's enrollment data is maintained at Parent Provider level. Parent Provider ID must match a valid Provider ID in VACMAN.
		Additional ID	Opt	char 15	
		Active Status	Opt	char 1	"Y" if provider is an active, participating provider. "N" if not active.
		Subdivision	Opt	char 15	Value should match a value in the VACMAN Subdivision table.
		Category 1	Opt	char 10	optional data used for categorizing provider at VACMAN level
		Category 2	Opt	char 10	optional data used for categorizing provider at VACMAN level
		Category 3	Opt	char 10	optional data used for categorizing provider at VACMAN level

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8	Provider Shipping Data Update	Overview			Update the shipping data in an existing Provider Profile record in VACMAN
		PIN (Provider ID)	Req	char 6	Provider ID must match existing Provider record.
		Facility Name/Last Name	Req	char 35	Facility (Clinic) Name or Provider's Last Name
		Shipping Contact	Req	char 30	Shipping Contact Name cannot be empty
		Shipping Address Line 1	Req	char 35	Shipping Address Line 1 cannot be empty.
		Shipping Address Line 2	Req	char 35	may be empty.
		Shipping City	Req	char 20	Shipping City cannot be empty.
		Shipping State	Req	char 2	Shipping State must be present and must be in the VACMAN States table.
		Shipping ZipCode	Req	char 10	Format: 99999-9999 or 99999. The first 5 digits of the Shipping ZipCode must be present and must be in the VACMAN ZipCodes table.
		Shipping Instructions	Req	char 50	cannot be empty; if there are no instructions, supply the word "NONE"
		Phone Number	Req	char 14	(999) 999-9999 format; cannot be empty
		Fax Number	Opt	char 14	Format: (999) 999-9999
		Phone Extension	Opt	char 4	may be empty.
		First Name	Opt	char 15	Provider's First Name: Include only if Provider's Last Name is in the Facility/Last Name field.
		Middle Initial	Opt	char 1	Provider's Middle Initial: Include only if Provider's Last Name is in the Facility/Last Name field.
		Title	Opt	char 9	Provider's Title, such as "M.D.". Include only if Provider's Last Name is in the Facility/Last Name field.
9	Vaccine Reference Table Read	Overview			Read a list of vaccine types from the VACMAN vaccine reference table. There are no parameters for this method.

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